

## FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

<b>Title of Invention</b>	APPARATUS FOR DETECTING IONIZING RADIATION																				
Application Number : Date : First Named Applicant: David Michael Hoffman Attorney Docket Number: 140804																					
<b>TOTAL FEE AUTHORIZED \$ 810</b> Patent fees are subject to annual revisions on or about October 1st of each year.																					
Filing as large entity																					
<b>BASIC FILING FEE</b>																					
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>1001</td><td>770</td><td>770</td></tr><tr><td colspan="3"></td><td>Subtotal For Basic Filing Fees: \$ 770</td></tr></tbody></table>		Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	1001	770	770				Subtotal For Basic Filing Fees: \$ 770								
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<b>EXTRA CLAIM FEES</b>																					
<table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 19</td><td>0</td><td>1202</td><td>18</td><td>0</td></tr><tr><td>Independent Claims : 2</td><td>0</td><td>1201</td><td>86</td><td>0</td></tr><tr><td colspan="3"></td><td colspan="2">Subtotal For Extra Claims Fees: \$ 0</td></tr></tbody></table>		Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$	Total Claims : 19	0	1202	18	0	Independent Claims : 2	0	1201	86	0				Subtotal For Extra Claims Fees: \$ 0	
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<b>ASSIGNMENT FEES</b>																					
<table border="1"><thead><tr><th>Fee Description</th><th>Property Number</th><th>Quantity</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Recording Each Patent Assignment Per Property Fee</td><td>00000000</td><td>1</td><td>8021</td><td>40</td><td>40</td></tr><tr><td colspan="3"></td><td colspan="3">Subtotal For Additional Fees: \$40</td></tr></tbody></table>		Fee Description	Property Number	Quantity	Fee Code	Amount \$	Fee Paid \$	Recording Each Patent Assignment Per Property Fee	00000000	1	8021	40	40				Subtotal For Additional Fees: \$40				
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<b>AUTHORIZED BILLING INFORMATION</b>																					
<b>The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</b>																					
Deposit account number:	070845																				
Deposit name:	GE Medical Systems Global Technology Company, LLC																				
Deposit authorized name:	David Arnold																				
Signature:	DA																				

Date (YYYYMMDD): 2004-01-29

Charge Assignment Fees Required Under 37 C.F.R. Section 1.21 (h).

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.